



BOARD OF HEALTH MEETING MINUTES
Tuesday, January 29, 2019

BOARD MEMBERS:

Georgia Hanigan, Commissioner, Payette County
Nate Marvin, Commissioner, Washington County
Tom Dale, Commissioner, Canyon County
Kelly Aberasturi, Commissioner, Owyhee County
Viki Purdy, Commissioner, Adams County
Sam Summers, MD, Physician Representative
Bryan Elliott, Commissioner, Gem County

STAFF MEMBERS:

Nikole Zogg
Doug Doney (Excused)
Patty Foster
Katrina Williams
Carol Julius
Brian Crawford

GUESTS: Jami Delmore, Amber Aberasturi, Ashley Anderson, Cristina Froude

MEETING CALLED TO ORDER -- CHAIR

Chairman Bryan Elliott called the business meeting to order at 10:04 a.m.

REQUEST FOR ADDITIONAL AGENDA ITEMS

Chairman Bryan Elliott asked for additional agenda items. Nikki Zogg has several items to add to her Director's Report including community collaborative report update, ReadyKamp funding, and Idaho Suicide Prevention Hotline Update.

MOTION: Dr. Summers moved to approve the agenda. Commissioner Marvin seconded the motion. Motion passed unanimously.

PLEDGE OF ALLEGIANCE

Meeting attendees participated in the Pledge of Allegiance.

PUBLIC COMMENT

No members of the public were present for the comment period.

INTRODUCTION OF NEW EMPLOYEES

Nikki Zogg introduced Cristina Froude. Cristina joins Southwest District Health (SWDH) as a Project Manager. Cristina worked at Terry Reilly Health Services previously. Cristina will oversee the crisis center operations as well as help with some of the behavioral health programs. In addition, she will assist SWDH with some organizational management and performance management objectives.

WELCOME TO NEW BOARD OF HEALTH MEMBERS

Nikki welcomed Commissioner Georgia Hanigan. Commissioner Hanigan replaces outgoing Payette County Commissioner Larry Church who recently retired.

REVIEW AND APPROVAL OF 12/18/18 MINUTES

Board members reviewed meeting minutes from the meeting held December 18, 2018.

MOTION: Commissioner Marvin moved to approve the December 18, 2018 meeting minutes. Dr. Summers seconded the motion. Motion passed unanimously.

REVENUE AND EXPENDITURE REPORT:

Patty Foster presented the December 2018 financial report. Patty explained that 50% was the target for December. Revenues were at almost 51% and expenditures were at 43%. She reported that the current cash position is -\$16,437. This will change significantly with the January budget report following the receipt and addition of \$275,000 for crisis center funding. This addition will move SWDH into a positive cash position.

Patty noted clinic fee revenue is still lagging at 41% but the Environmental and Community Health Services revenue is doing well at nearly 59%.

Lastly, Patty noted the restricted and committed fund balances. She explained that restricted funds are those restricted by contract or grant and can only be expended as noted within the grant or contract. Committed funds are those the Board of Health has pledged for a particular purpose.

INFLUENZA UPDATE

Jami Delmore, Environmental and Community Health, provided Board members with an influenza update. Jami noted that influenza is not a reportable disease in Idaho so information is not always readily available. So far this flu season in Idaho there have been five deaths. Only one of those deaths occurred in our health district. Jami explained that Health and Welfare is very careful about what is reported about the flu deaths. The only information Jami has is that the individual who died in District 3 was a male over age 50. Commissioner Dale asked if flu was the cause of death or if it is a complication of an illness such as pneumonia. Jami does not have further information regarding the individual who died.

Currently the predominant flu strain is Influenza H1N1. The vaccine is effective against H1N1. Jami highlighted some differences with the influenza season last year which was primarily H3 strain and Influenza B Yamagata. Dr. Summers explained that the term Yamagata indicates where that strain was identified. Influenza B Victoria has not yet been seen.

Board members asked if resistance to the influenza strain is a problem. Jami explained that the virus changes so rapidly that keeping up with the strains is a constant effort. In Idaho the flu season is mainly between October and May. Generally, the flu season peaks in about February.

Commissioner Dale asked about how the statistics are gathered. The strain can only be identified through a blood test. How statistically accurate are the charts? Dr. Summers explained that patients who report with symptoms within the first 48 hours are typically included in the statistics.

Jami provided some information on the recent flu outbreak at Notus School District. The school closed last Thursday and worked to sanitize and disinfect the school and give those who were sick time to rest. The Notus School District operates on a 4-day week and is closed Fridays. The school reopened Monday, January 28, 2019 and there is an influenza immunization clinic being held at the school. Typically, after receiving the vaccination it takes about ten days to develop immunity to the virus.

The flu vaccine is still plentiful and it is never too late to get the vaccine. Jami suggested encouraging anyone who has not yet received the vaccine to be immunized.

MEASLES OUTBREAK UPDATE

Jami provided information on the recent measles outbreak in Washington State. She explained that the Portland, Oregon area is being affected as well. She emphasized that measles is incredibly infectious. The virus remains airborne for up to two hours after an infected person has left the area. She explained that child care facilities, churches, health care facilities, airports, and a Trailblazers basketball game are recent areas where people may have been exposed to measles.

Commissioner Dale asked what the primary danger is to children? In the past, Jami explained, people exposed their children to the measles. About 1 in 1,000 of those children exposed died. Dr. Summers explained that encephalitis, swelling of the brain, is a complication.

The epidemiologists have visited with schools about proper disinfection and sanitizing the areas to prevent exposure. Nikki asked if there are reports of Idahoans traveling to the affected areas and returning to Idaho yet. None have been confirmed yet but epidemiologists from Idaho have been pulled in to help prevent further spread of the disease.

BUDGET ADJUSTMENT PROCESS UPDATE MEMORANDUM

Nikki presented information from SWDH legal counsel in response to Board member questions from the December Board meeting regarding budget adjustments and the correct process. No additional hearings are required to approve budget adjustments.

REQUEST TO AMEND THE 2019 BOARD OF HEALTH ANNUAL MEETING NOTICE

Nikki asked Board members to approve an annual meeting notice adjustment to amend the March 2019 date to allow her to be out of the office without missing the monthly Board meeting. She proposed March 19, 2019 as an alternative date.

MOTION: Commissioner Dale made a motion to move the March 2019 meeting from March 26 to March 19, 2019. Commissioner Marvin seconded the motion. Motion passed unanimously.

OFFICE OF DRUG POLICY PARTNERSHIP FOR SUCCESS GRANT UPDATE

Amber Aberasturi, Senior Health Educator, presented an update on the Office of Drug Policy (ODP) Partnership for Success update. Partnership for Success is funded through the Office of Drug Policy with a grant they received from Substance Abuse and Mental Health Services Administration (SAMSHA) through the behavioral health board for substance abuse in the region to reduce the rate of underage drinking, marijuana use, and methamphetamine use. For our region, two priority subpopulations were identified – veterans and Latino families. At the direction of the Behavioral Health Board all populations will be included in the strategies implemented to meet the grant deliverables. The grant runs until June 2023 and provides about \$215,000 per year.

Amber explained the strategies required to be used including implementing the Strengthening Families program by training at least two facilitators, coordinating drug impairment training, a free training available through Idaho State Police, and helping promote the “Be the Parents” media campaign information which encourages parents to learn and recognize the signs of substance use and abuse.

RURAL INTEGRATED BEHAVIORAL HEALTH HUB NETWORK (RIBHHN) GRANT

Ashley Anderson, Health Educator, provided an update on the RIBHHN grant which is a sustainable rural program to develop and implement the programs funded by Health Resources and Services Administration (HRSA). This funding was allocated in May. The overall vision is improving access to behavioral health and primary care for all rural Idahoans. Ashley provided a background description of the program objectives. Public health districts and primary care provider groups came together and proposed an integrated behavioral health model that is free to use. This work is crucial for rural communities that face behavioral health provider and primary care shortages.

CRISIS CENTER UPDATE

Cristina presented an update on the crisis center. The crisis center workgroup met and chose a name for the center - Western Idaho Community Crisis Center. The opening date is anticipated to be mid-April. Lifeways has not yet returned the signed contract. An outreach workgroup including faith based organizations, law enforcement, community paramedics, family advocates and Lifeways representation has started meeting to ensure the right language is used to promote the services for the center. An outreach and a communication plan will be developed to notify the community of these services, when they are available, and when a patient can be dropped off for these services.

Southwest District Health is working to stand-up community advisory committee. Lifeways and SWDH are working to secure in-kind donations to reduce upfront costs.

EXECUTIVE COUNCIL REPORT

The Legislature is in session now. There are several bills that may be combined. Senator Guthrie is working with a citizen in his district, Health District 6, to change the temporary food fee and how the fees are structured. Representative Blanksma is supporting a bill taking away the Board's authority to set fees specifically related to the food fees and she is seeking to merge her bill with Senator Guthrie's.

The seven Idaho public health districts unanimously agreed to support Senator Guthrie's bill. Representative Blanksma's attempts to merge the two bills will have potential negative impacts if merged. The potential bill was specifically addressed that will remove the ability of boards to act on their own authority to establish fees in the food protection program.

Taxpayers are already subsidizing too many things and the basic premise upon which we are acting is relieving the burden of taxpayers to subsidize the food establishments.

DIRECTOR'S REPORT

Department of Human Resources (DHR) CEC Report

Nikki shared the most recent report from DHR and explained that SWDH typically tries to align each fiscal year's budget for personnel costs with the DHR adjustments and recommendations. The report recommends a 2% adjustment to the salary structure for some positions. The report does not go into detail whether this adjustment is for all positions or just certain positions.

The DHR report also addresses the payline exception component. There are about twelve positions in the State where in order to recruit and retain that level of staff a payline exception is allowed.

Nikki also highlighted the DHR merit increase recommendation of at least 3% based on merit and performance across the organization.

Employee benefits package does not have any changes recommended. Nikki pointed out that the employee portion of the PERSI contribution will increase this year.

Commissioner Purdy asked whether the value of the benefits package is factored in when considering wages for public versus private sector. Patty explained that generally the State's benefit package is better than a private organization. She is unsure how the benefits package is weighted.

Legislative Update

Nikki provided a brief legislative updates. There has been some discussion around possible funding sources to fund the Medicaid expansion. The millennium fund and the catastrophic health care fund have been identified as a possible funding sources.

One thought is to ensure Medicaid covers behavioral health as well and help alleviate the need for counties to pay for involuntary medical holds. If the levy for indigency is eliminated there is still a gap for counties for burials, mental health and a variety of fees counties are responsible for.

A compilation of funding sources will be required to fund the match required.

Food fee implementation

Nikki asked staff to track any questions, comments, or complaints following the implementation of the new food fee structure. Nikki presented the tracking document for these issues and noted they were minimal. Brian explained that he has not received any pushback or negative comments from our food establishments.

Community collaborative

Nikki briefly explained documents regarding the community collaborative with Districts 3 and 4 to transition from the Statewide Healthcare Innovation Program (SHIP) requirements to maintain regional collaboratives. Those collaboratives worked to improve the relationships between public health and clinical practices and improve health outcomes. Often, those collaborative initiatives are more community based than based within the clinical setting. Dr. Summers co-chaired the SWDH community collaborative and explained this transition is important as the two health districts share similar populations and health care systems. Both District 3 and District 4 feel it makes sense to pool resources particularly since there is no ongoing funding for this work. A request for funding this for 1.2 FTEs for two years was submitted to the legislature. The Governor supported the recommendation so the Joint Finance Appropriations Committee (JFAC) will hear that request.

Another element to this collaborative is looking for partnerships with hospital and insurance foundations in particular and identifying opportunities to pool financial resources to target health initiatives across the region. Historically, foundations have had more of an interest to put their brands out by sponsoring fun runs or free diabetes screenings. These events do not do much to improve health outcomes.

The Districts have been working to gathering letters of support from these foundations. The request is around \$120,000 and the plan is for funding to go to Health District 4 to fund the 1.2 FTE even though it is a joint effort and SWDH will have shared input and membership in that collaborative.

ReadyKamp Funding Update

The funding SWDH has previously used to support ReadyKamp was not awarded this year from the National Association of City and County Health Officials (NACCHO). Southwest District Health staff applied for but did not receive an additional grant. Nikki explained that she plans to come to the Board with a funding request of about \$6,000 next month. The ReadyKamp program has been a very positive, impactful resource for the youth in our six-county region. The program is one of two or three considered best practice camps across the country. Nikki appreciates the Board's support of this program in the past.

Idaho Suicide Prevention Hotline report

Nikki provided the most recent statistics from the Idaho Suicide Prevention Hotline.

There being no further business, the meeting adjourned at 12:02 p.m.

Respectfully submitted:

Approved as written:



Nikole Zogg
Secretary to the Board



Bryan Elliott
Chairman

2/26/19

Date